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CONFIRMATION NO. 3776

<b>SERIAL NUMBER</b> 10/563,178	<b>FILING OR 371(c) DATE</b> 04/25/2006 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 2859	<b>ATTORNEY DOCKET NO.</b> 7665-0002WOUS
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/CH04/00386 06/24/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

EUROPEAN PATENT OFFICE (EPO) 03015094.0 07/03/2003

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 05/14/2006

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> SWITZERLAND	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

35301

**TITLE**

Magnetic resonance imaging method

<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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